



SERIAL NUMBER		FILING DATE	CLASS	G	ROUP ART UNIT	ATTORNEY DOC	KET NO.	
09/432,90	4	11/02/99	601		3733	1001.1012	?	
CESAR Z. LINA, UNIVERSAL CITY, TX.								
VERIFIED	THIS AP WH WH WH	DATA******* PLN IS A CON ICH IS A CON ICH IS A CON ICH IS A CON ICH IS A CON	OF 08/8 OF 08/4 OF 08/6 OF 07/7	316,807 428,268 275,920 000,545 766,576	03/19/97 PAT 04/25/95 ABN 07/14/94 ABN 01/04/93 ABN 09/27/91 ABN	5,989,204		
**371 (NAT' VERIFIED	L STAGE) D	ATA*******	****	***				
**FOREIGN A VERIFIED	PPLICATION	S******					· · · · · · · · · · · · · · · · · · ·	
IF REQUIRED	, FOREIGN	FILING LICENS	E GRANTEI	D 12/02/	<b>'</b> 99		· · · · · · · · · · · · · · · · · · ·	
Foreign Priority claims 35 USC 119 (a-d) col Verified and Acknowl	nditions met 🛚		r Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS	
SEE CUSTOM	ER NUMBER:	022775						
FOOT MOUNTED VENOUS COMPRESSION DEVICE								
FILING FEE RECEIVED \$838	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT				IT	All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit		